

Fill in this information to identify your case:

United States Bankruptcy Court for the:

NORTHERN DISTRICT OF ILLINOIS

Case number (if known)

Chapter you are filing under:

- Chapter 7
- Chapter 11
- Chapter 12
- Chapter 13

Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, “Do you own a car,” the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

About Debtor 1:

1. Your full name

Write the name that is on your government-issued picture identification (for example, your driver's license or passport).

Bring your picture identification to your meeting with the trustee.

Lawrence

First name

R.

Middle name

Garcia

Last name and Suffix (Sr., Jr., II, III)

About Debtor 2 (Spouse Only in a Joint Case):

First name

Middle name

Last name and Suffix (Sr., Jr., II, III)

2. All other names you have used in the last 8 years

Include your married or maiden names.

3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)

xxx-xx-6390

Debtor 1 Lawrence R. Garcia**About Debtor 1:****4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years**

I have not used any business name or EINs.

Include trade names and *doing business as* names

Business name(s)

EINs

About Debtor 2 (Spouse Only in a Joint Case):

I have not used any business name or EINs.

Business name(s)

EINs

5. Where you live**6154 W. Thorndale Ave.
Chicago, IL 60646**

Number, Street, City, State & ZIP Code

Cook

County

If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.

Number, P.O. Box, Street, City, State & ZIP Code

If Debtor 2 lives at a different address:

Number, Street, City, State & ZIP Code

County

If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.

Number, P.O. Box, Street, City, State & ZIP Code

6. Why you are choosing this district to file for bankruptcy

Check one:

Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

I have another reason. Explain. (See 28 U.S.C. § 1408.)

Check one:

Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

I have another reason. Explain. (See 28 U.S.C. § 1408.)

Part 2: Tell the Court About Your Bankruptcy Case

7. The chapter of the Bankruptcy Code you are choosing to file under *Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.*

Chapter 7
 Chapter 11
 Chapter 12
 Chapter 13

8. How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.
 I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A).
 I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition.

9. Have you filed for bankruptcy within the last 8 years? No.
 Yes.

| | | |
|----------------|------------|-------------------|
| District _____ | When _____ | Case number _____ |
| District _____ | When _____ | Case number _____ |
| District _____ | When _____ | Case number _____ |

10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? No
 Yes.

| | | |
|----------------|---------------------------|-----------------------------|
| Debtor _____ | Relationship to you _____ | |
| District _____ | When _____ | Case number, if known _____ |
| Debtor _____ | Relationship to you _____ | |
| District _____ | When _____ | Case number, if known _____ |

11. Do you rent your residence? No. Go to line 12.
 Yes. Has your landlord obtained an eviction judgment against you and do you want to stay in your residence?
 No. Go to line 12.
 Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this bankruptcy petition.

Debtor 1 Lawrence R. Garcia

Part 3: Report About Any Businesses You Own as a Sole Proprietor**12. Are you a sole proprietor of any full- or part-time business?** No. Go to Part 4. Yes. Name and location of business

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

Name of business, if any

Number, Street, City, State & ZIP Code

Check the appropriate box to describe your business:

- Health Care Business (as defined in 11 U.S.C. § 101(27A))
- Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- Stockbroker (as defined in 11 U.S.C. § 101(53A))
- Commodity Broker (as defined in 11 U.S.C. § 101(6))
- None of the above

13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?

For a definition of *small business debtor*, see 11 U.S.C. § 101(51D).

If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. 1116(1)(B).

 No. I am not filing under Chapter 11. No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code. Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.**Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention****14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?**

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

 No. Yes.

What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

Debtor 1 **Lawrence R. Garcia**

Case number (if known) _____

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

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I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

Debtor 1 Lawrence R. Garcia

Part 6: Answer These Questions for Reporting Purposes

| | | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 16. What kind of debts do you have? | 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." | | |
| | <input type="checkbox"/> No. Go to line 16b. | | |
| | <input checked="" type="checkbox"/> Yes. Go to line 17. | | |
| 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. | | | |
| | <input type="checkbox"/> No. Go to line 16c. | | |
| | <input type="checkbox"/> Yes. Go to line 17. | | |
| 16c. | State the type of debts you owe that are not consumer debts or business debts <hr/> | | |
| 17. Are you filing under Chapter 7? | <input type="checkbox"/> No. I am not filing under Chapter 7. Go to line 18. | | |
| Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | <input checked="" type="checkbox"/> Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | | |
| 18. How many Creditors do you estimate that you owe? | <input checked="" type="checkbox"/> 1-49 <input type="checkbox"/> 50-99 <input type="checkbox"/> 100-199 <input type="checkbox"/> 200-999 | <input type="checkbox"/> 1,000-5,000 <input type="checkbox"/> 5001-10,000 <input type="checkbox"/> 10,001-25,000 | <input type="checkbox"/> 25,001-50,000 <input type="checkbox"/> 50,001-100,000 <input type="checkbox"/> More than 100,000 |
| 19. How much do you estimate your assets to be worth? | <input checked="" type="checkbox"/> \$0 - \$50,000 <input type="checkbox"/> \$50,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$500,000 <input type="checkbox"/> \$500,001 - \$1 million | <input type="checkbox"/> \$1,000,001 - \$10 million <input type="checkbox"/> \$10,000,001 - \$50 million <input type="checkbox"/> \$50,000,001 - \$100 million <input type="checkbox"/> \$100,000,001 - \$500 million | <input type="checkbox"/> \$500,000,001 - \$1 billion <input type="checkbox"/> \$1,000,000,001 - \$10 billion <input type="checkbox"/> \$10,000,000,001 - \$50 billion <input type="checkbox"/> More than \$50 billion |
| 20. How much do you estimate your liabilities to be? | <input checked="" type="checkbox"/> \$0 - \$50,000 <input type="checkbox"/> \$50,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$500,000 <input type="checkbox"/> \$500,001 - \$1 million | <input type="checkbox"/> \$1,000,001 - \$10 million <input type="checkbox"/> \$10,000,001 - \$50 million <input type="checkbox"/> \$50,000,001 - \$100 million <input type="checkbox"/> \$100,000,001 - \$500 million | <input type="checkbox"/> \$500,000,001 - \$1 billion <input type="checkbox"/> \$1,000,000,001 - \$10 billion <input type="checkbox"/> \$10,000,000,001 - \$50 billion <input type="checkbox"/> More than \$50 billion |

Part 7: Sign Below

For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Lawrence R. Garcia

Lawrence R. Garcia
Signature of Debtor 1

Signature of Debtor 2

Executed on December 6, 2016
MM / DD / YYYY

Executed on _____
MM / DD / YYYY

Debtor 1 Lawrence R. Garcia**For your attorney, if you are represented by one**

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ George Kasios

Signature of Attorney for Debtor

Date

December 6, 2016

MM / DD / YYYY

George Kasios

Printed name

The Law Office of George Kasios, Ltd.

Firm name

4433 W. Touhy Avenue**Suite 208****Lincolnwood, IL 60712**

Number, Street, City, State & ZIP Code

Contact phone

847-983-4900

Email address

georgekasios@kasioslaw.com**6315457**

Bar number & State

Fill in this information to identify your case:

| | | | |
|-----------------------------------------|-------------------------------|-------------|-----------|
| Debtor 1 | Lawrence R. Garcia | | |
| | First Name | Middle Name | Last Name |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name |
| United States Bankruptcy Court for the: | NORTHERN DISTRICT OF ILLINOIS | | |
| Case number (if known) | | | |

Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Part 1: Summarize Your Assets

| | | Your assets Value of what you own |
|-----|---------------------------------------------------------------|---------------------------------------------|
| 1. | Schedule A/B: Property (Official Form 106A/B) | \$ 0.00 |
| 1a. | Copy line 55, Total real estate, from Schedule A/B..... | \$ 0.00 |
| 1b. | Copy line 62, Total personal property, from Schedule A/B..... | \$ 4,549.85 |
| 1c. | Copy line 63, Total of all property on Schedule A/B..... | \$ 4,549.85 |

Part 2: Summarize Your Liabilities

| | | Your liabilities Amount you owe |
|-----|-----------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------|
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) | \$ 0.00 |
| 2a. | Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of <i>Schedule D</i> ... | \$ 0.00 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) | \$ 5,633.45 |
| 3a. | Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i> | \$ 5,633.45 |
| 3b. | Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i> | \$ 25,692.29 |
| | | Your total liabilities \$ 31,325.74 |

Part 3: Summarize Your Income and Expenses

| | | |
|----|---------------------------------------------------------------------------|--------------------|
| 4. | Schedule I: Your Income (Official Form 106I) | \$ 2,713.93 |
| | Copy your combined monthly income from line 12 of <i>Schedule I</i> | \$ 2,713.93 |

Part 4: Answer These Questions for Administrative and Statistical Records

6. Are you filing for bankruptcy under Chapters 7, 11, or 13?

No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Yes

7. What kind of debt do you have?

Your debts are primarily consumer debts. *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Debtor 1 Lawrence R. Garcia

8. **From the Statement of Your Current Monthly Income:** Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

| | |
|----|---------------|
| \$ | <u>772.61</u> |
|----|---------------|

9. **Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:**

| From Part 4 on Schedule E/F, copy the following: | Total claim |
|------------------------------------------------------------------------------------------------------------------------------|--------------------|
| 9a. Domestic support obligations (Copy line 6a.) | \$ <u>0.00</u> |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ <u>5,633.45</u> |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ <u>0.00</u> |
| 9d. Student loans. (Copy line 6f.) | \$ <u>0.00</u> |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ <u>0.00</u> |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ <u>0.00</u> |
| 9g. Total. Add lines 9a through 9f. | \$ <u>5,633.45</u> |

Fill in this information to identify your case and this filing:

| | | | |
|------------------------------------------------------------------------------|---------------------------|-------------|-------------------------------------------------------------|
| Debtor 1 | Lawrence R. Garcia | | |
| | First Name | Middle Name | Last Name |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS | | | |
| Case number | | | <input type="checkbox"/> Check if this is an amended filing |

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

- No. Go to Part 2.
- Yes. Where is the property?

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

- No
- Yes

| | |
|------------------------------------------------------------|------------------|
| 3.1 Make: | Chevrolet |
| Model: | S10 |
| Year: | 1999 |
| Approximate mileage: | 65,000 |
| Other information: no operable value per kbb.com | |

Who has an interest in the property? Check one

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another

Check if this is community property
(see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? Current value of the portion you own?

\$0.00 **\$0.00**

4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

- No
- Yes

5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for .pages you have attached for Part 2. Write that number here.....=>

\$0.00

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

- No

Debtor 1 Lawrence R. Garcia

Document

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Case number (if known)

 Yes. Describe.....

Household Goods Including: 1 microwave, 1 vacuum, 1 crockpot, 1 iron, 1 BBQ Grill, 1 toaster, 1 mixer, 1 coffee maker, 2 fans, 1 breakfast table, dinnerware, pots/pans, utensils, 2 chairs, cups, 1 couch, 1 coffee table, 1 arm chair, 1 ottoman, 2 end tables, 4 folding tables, 1 television stand, 1 bookcase, 1 bed, 1 night stand, 1 dresser, 1 mirror, 1 drawer, 2 lamps, 1 broom, 2 pieces of luggage, 2 vases, 6 pictures, 4 curtains, 3 rugs, 1 ironing board, 1 bucket

\$1,245.00

7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

 No Yes. Describe.....

Electronics Including: 1 television, 1 stereo, 1 radio, 1 dvd player, 1 computer, 1 telephone, 1 alarm clock, 1 cd player, 1 laptop, 1 printer, 1 cell phone

\$835.00

8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

 No Yes. Describe.....

books, cds, dvds, cassettes, family pictures

\$500.00

9. Equipment for sports and hobbies

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

 No Yes. Describe.....

1 piano, 1 cicycle, exercise equipment, 1 digital camera

\$475.00

10. Firearms

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

 No Yes. Describe.....**11. Clothes**

Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories

 No Yes. Describe.....

clothing and shoes

\$800.00

12. Jewelry

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

 No Yes. Describe.....

watch

\$40.00

Debtor 1 Lawrence R. Garcia

Document

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Case number (if known)

13. Non-farm animals*Examples:* Dogs, cats, birds, horses No Yes. Describe.....**14. Any other personal and household items you did not already list, including any health aids you did not list** No Yes. Give specific information.....**15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here**

\$3,895.00

Part 4: Describe Your Financial Assets**Do you own or have any legal or equitable interest in any of the following?****Current value of the portion you own?**

Do not deduct secured claims or exemptions.

16. Cash*Examples:* Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition No Yes.....**Cash****\$40.00****17. Deposits of money***Examples:* Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. No Yes.....

Institution name:

17.1. Checking**TCF Bank****\$300.00****18. Bonds, mutual funds, or publicly traded stocks***Examples:* Bond funds, investment accounts with brokerage firms, money market accounts No Yes.....

Institution or issuer name:

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No Yes. Give specific information about them.....

Name of entity:

% of ownership:

20. Government and corporate bonds and other negotiable and non-negotiable instruments*Negotiable instruments* include personal checks, cashiers' checks, promissory notes, and money orders.*Non-negotiable instruments* are those you cannot transfer to someone by signing or delivering them. No Yes. Give specific information about them

Issuer name:

21. Retirement or pension accounts*Examples:* Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans No Yes. List each account separately.

Type of account:

Institution name:

Pension through American Dental Association**\$0.00**

Debtor 1 Lawrence R. Garcia**22. Security deposits and prepayments**

Your share of all unused deposits you have made so that you may continue service or use from a company

Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

 No Yes.

Institution name or individual:

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No Yes..... Issuer name and description.**24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.**

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

 No Yes..... Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c):**25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit** No Yes. Give specific information about them....**26. Patents, copyrights, trademarks, trade secrets, and other intellectual property**

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

 No Yes. Give specific information about them....**27. Licenses, franchises, and other general intangibles**

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

 No Yes. Give specific information about them....**Money or property owed to you?****Current value of the portion you own?**

Do not deduct secured claims or exemptions.

28. Tax refunds owed to you No Yes. Give specific information about them, including whether you already filed the returns and the tax years.....**29. Family support**

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

 No Yes. Give specific information.....**30. Other amounts someone owes you**

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

 No Yes. Give specific information..**31. Interests in insurance policies**

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

 No Yes. Name the insurance company of each policy and list its value.

Company name:

Beneficiary:

Surrender or refund value:

Universal Life Insurance through Lincoln Financial Group\$314.85

Debtor 1 Lawrence R. Garcia**32. Any interest in property that is due you from someone who has died**

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

No
 Yes. Give specific information..

33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment

Examples: Accidents, employment disputes, insurance claims, or rights to sue

No
 Yes. Describe each claim.....

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims

No
 Yes. Describe each claim.....

35. Any financial assets you did not already list

No
 Yes. Give specific information..

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here.....

\$654.85

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.**37. Do you own or have any legal or equitable interest in any business-related property?**

No. Go to Part 6.
 Yes. Go to line 38.

Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.

If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

No. Go to Part 7.
 Yes. Go to line 47.

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above**53. Do you have other property of any kind you did not already list?**

Examples: Season tickets, country club membership

No
 Yes. Give specific information.....

54. Add the dollar value of all of your entries from Part 7. Write that number here

\$0.00

Part 8: List the Totals of Each Part of this Form

| | |
|------------------------------------------------------------------------|------------------------------|
| 55. Part 1: Total real estate, line 2 | \$0.00 |
| 56. Part 2: Total vehicles, line 5 | \$0.00 |
| 57. Part 3: Total personal and household items, line 15 | \$3,895.00 |
| 58. Part 4: Total financial assets, line 36 | \$654.85 |
| 59. Part 5: Total business-related property, line 45 | \$0.00 |
| 60. Part 6: Total farm- and fishing-related property, line 52 | \$0.00 |
| 61. Part 7: Total other property not listed, line 54 | \$0.00 |
| 62. Total personal property. Add lines 56 through 61... | \$4,549.85 |
| | Copy personal property total |
| 63. Total of all property on Schedule A/B. Add line 55 + line 62 | \$4,549.85 |

Fill in this information to identify your case:

| | | | |
|-----------------------------------------|---------------------------|-------------------------------|-----------|
| Debtor 1 | Lawrence R. Garcia | | |
| | First Name | Middle Name | Last Name |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name |
| United States Bankruptcy Court for the: | | NORTHERN DISTRICT OF ILLINOIS | |
| Case number (if known) | | | |

Check if this is an amended filing

Official Form 106C**Schedule C: The Property You Claim as Exempt**

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

| Brief description of the property and line on <i>Schedule A/B</i> that lists this property | Current value of the portion you own | Amount of the exemption you claim | Specific laws that allow exemption |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|
| | Copy the value from <i>Schedule A/B</i> | <i>Check only one box for each exemption.</i> | |
| Household Goods Including: 1 microwave, 1 vacuum, 1 crockpot, 1 iron, 1 BBQ Grill, 1 toaster, 1 mixer, 1 coffee maker, 2 fans, 1 breakfast table, dinnerware, pots/pans, utensils, 2 chairs, cups, 1 couch, 1 coffee table, 1 arm chair, 1 ottoman, 2 end tables | \$1,245.00 | <input checked="" type="checkbox"/> \$1,245.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) |
| Line from <i>Schedule A/B: 6.1</i> | | | |
| Electronics Including: 1 television, 1 stereo, 1 radio, 1 dvd player, 1 computer, 1 telephone, 1 alarm clock, 1 cd player, 1 laptop, 1 printer, 1 cell phone | \$835.00 | <input checked="" type="checkbox"/> \$835.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) |
| Line from <i>Schedule A/B: 7.1</i> | | | |
| books, cds, dvds, cassettes, family pictures | \$500.00 | <input checked="" type="checkbox"/> \$500.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) |
| Line from <i>Schedule A/B: 8.1</i> | | | |
| 1 piano, 1 cicycle, exercise equipment, 1 digital camera | \$475.00 | <input checked="" type="checkbox"/> \$475.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) |
| Line from <i>Schedule A/B: 9.1</i> | | | |

Debtor 1 Lawrence R. Garcia

| Brief description of the property and line on <i>Schedule A/B</i> that lists this property | Current value of the portion you own | Amount of the exemption you claim | Specific laws that allow exemption |
|------------------------------------------------------------------------------------------------------------|--------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|
| | Copy the value from <i>Schedule A/B</i> | <i>Check only one box for each exemption.</i> | |
| Clothing and shoes Line from <i>Schedule A/B:</i> 11.1 | <u>\$800.00</u> | <input checked="" type="checkbox"/> <u>\$800.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(a) |
| watch Line from <i>Schedule A/B:</i> 12.1 | <u>\$40.00</u> | <input checked="" type="checkbox"/> <u>\$40.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) |
| Cash Line from <i>Schedule A/B:</i> 16.1 | <u>\$40.00</u> | <input checked="" type="checkbox"/> <u>\$40.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) |
| Checking: TCF Bank Line from <i>Schedule A/B:</i> 17.1 | <u>\$300.00</u> | <input checked="" type="checkbox"/> <u>\$300.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) |
| Universal Life Insurance through Lincoln Financial Group Line from <i>Schedule A/B:</i> 31.1 | <u>\$314.85</u> | <input checked="" type="checkbox"/> <u>\$314.85</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) |

3. Are you claiming a homestead exemption of more than \$160,375?

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

No

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

No

Yes

Fill in this information to identify your case:

| | | | |
|-----------------------------------------|-------------------------------|-------------|-----------|
| Debtor 1 | Lawrence R. Garcia | | |
| | First Name | Middle Name | Last Name |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name |
| United States Bankruptcy Court for the: | NORTHERN DISTRICT OF ILLINOIS | | |
| Case number (if known) | | | |

Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 Yes. Fill in all of the information below.

Fill in this information to identify your case:

| | | | |
|-----------------------------------------|-------------------------------|-------------|-----------|
| Debtor 1 | Lawrence R. Garcia | | |
| | First Name | Middle Name | Last Name |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name |
| United States Bankruptcy Court for the: | NORTHERN DISTRICT OF ILLINOIS | | |
| Case number (if known) | | | |

Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

No. Go to Part 2.
 Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

| | Total claim | Priority amount | Nonpriority amount | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|-----------------|
| 2.1 Illinois Dept. of Revenue Priority Creditor's Name PO Box 19035 Springfield, IL 62794-9035 Number Street City State Zip Code | Last 4 digits of account number 9866 | \$705.94 | \$0.00 | \$705.94 |
| Who incurred the debt? Check one. | When was the debt incurred? 2012 | As of the date you file, the claim is: Check all that apply | | |
| <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another | <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | Type of PRIORITY unsecured claim: <input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify taxes | | |
| <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | | | | |
| 2.2 Illinois Dept. of Revenue Priority Creditor's Name PO Box 19035 Springfield, IL 62794-9035 Number Street City State Zip Code | Last 4 digits of account number 9866 | \$58.94 | \$58.94 | \$0.00 |
| Who incurred the debt? Check one. | When was the debt incurred? 2013 | As of the date you file, the claim is: Check all that apply | | |
| <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another | <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | Type of PRIORITY unsecured claim: <input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify taxes | | |
| <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | | | | |

Debtor 1 Lawrence R. Garcia

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Case number (if known)

| | | | | | |
|-----|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|----------|------------|
| 2.3 | Illinois Dept. of Revenue Priority Creditor's Name PO Box 19035 Springfield, IL 62794-9035 Number Street City State Zip Code | Last 4 digits of account number <u>9866</u> | \$162.97 | \$162.97 | \$0.00 |
| | | When was the debt incurred? <u>2014</u> | | | |
| | | As of the date you file, the claim is: Check all that apply | | | |
| | | <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | | | |
| | | Type of PRIORITY unsecured claim: | | | |
| | | <input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify <u>taxes</u> | | | |
| | Who incurred the debt? Check one. | | | | |
| | <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another | | | | |
| | Check if this claim is for a community debt | | | | |
| | <input type="checkbox"/> | | | | |
| | Is the claim subject to offset? | | | | |
| | <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | | | | |
| 2.4 | IRS Dept. of Treasury Priority Creditor's Name Internal Revenue Service Kansas City, MO 64999 Number Street City State Zip Code | Last 4 digits of account number <u>P71A</u> | \$436.50 | \$0.00 | \$436.50 |
| | | When was the debt incurred? <u>2009</u> | | | |
| | | As of the date you file, the claim is: Check all that apply | | | |
| | | <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | | | |
| | | Type of PRIORITY unsecured claim: | | | |
| | | <input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify <u>taxes</u> | | | |
| | Who incurred the debt? Check one. | | | | |
| | <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another | | | | |
| | Check if this claim is for a community debt | | | | |
| | <input type="checkbox"/> | | | | |
| | Is the claim subject to offset? | | | | |
| | <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | | | | |
| 2.5 | IRS Dept. of Treasury Priority Creditor's Name Internal Revenue Service Kansas City, MO 64999 Number Street City State Zip Code | Last 4 digits of account number <u>P71A</u> | \$4,269.10 | \$0.00 | \$4,269.10 |
| | | When was the debt incurred? <u>2005</u> | | | |
| | | As of the date you file, the claim is: Check all that apply | | | |
| | | <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | | | |
| | | Type of PRIORITY unsecured claim: | | | |
| | | <input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify <u>taxes</u> | | | |
| | Who incurred the debt? Check one. | | | | |
| | <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another | | | | |
| | Check if this claim is for a community debt | | | | |
| | <input type="checkbox"/> | | | | |
| | Is the claim subject to offset? | | | | |
| | <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | | | | |

Part 2: List All of Your NONPRIORITY Unsecured Claims**3. Do any creditors have nonpriority unsecured claims against you?**

No. You have nothing to report in this part. Submit this form to the court with your other schedules.
 Yes.

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

Total claim

Debtor 1 Lawrence R. Garcia

| | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|
| 4.1 | <p>Alliant Credit Union Nonpriority Creditor's Name Attn: Collection Dept Po Box 66945 Chicago, IL 60666 Number Street City State Zip Code</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed</p> <p><input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Check if this claim is for a community debt <input type="checkbox"/> Student loans</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>Unsecured</u></p> | Last 4 digits of account number <u>0002</u> \$4,372.00 |
| <p>4.2</p> <p>Barclays Bank Nonpriority Creditor's Name 125 S. West St. Wilmington, DE 19801 Number Street City State Zip Code</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed</p> <p><input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Check if this claim is for a community debt <input type="checkbox"/> Student loans</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>Notice</u></p> | | Last 4 digits of account number <u> </u> \$0.00 When was the debt incurred? <u> </u> |
| <p>4.3</p> <p>Caine & Weiner Nonpriority Creditor's Name Po Box 5010 Woodland Hills, CA 91365 Number Street City State Zip Code</p> <p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed</p> <p><input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Check if this claim is for a community debt <input type="checkbox"/> Student loans</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <u>Collection Attorney Rescare Home Care Services</u></p> | | Last 4 digits of account number <u>1146</u> \$2,525.00 When was the debt incurred? <u>Opened 01/15</u> |

Debtor 1 Lawrence R. Garcia

Document

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Case number (if known)

4.4

Capital One

Nonpriority Creditor's Name

**Po Box 30285
Salt Lake City, UT 84130**

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

8202\$1,144.00

When was the debt incurred?

Opened 10/07 Last Active
9/10/11

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts

 Other. Specify Credit Card

4.5

Capital One

Nonpriority Creditor's Name

**Po Box 30285
Salt Lake City, UT 84130**

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

7363\$1,103.00

When was the debt incurred?

Opened 11/10 Last Active
9/10/11

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts

 Other. Specify Credit Card

4.6

Cardworks/CW Nexus

Nonpriority Creditor's Name

**Pob 9201
Old Bethpage, NY 11804**

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

5283\$2,222.00

When was the debt incurred?

Opened 10/10 Last Active
3/27/12

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts

 Other. Specify Credit Card

Debtor 1 Lawrence R. Garcia

Document

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Case number (if known)

4.7

Certified Services Inc

Nonpriority Creditor's Name

Po Box 177**Waukegan, IL 60079**

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

 No Yes

Last 4 digits of account number

178A\$158.00

When was the debt incurred?

Opened 10/15

As of the date you file, the claim is: Check all that apply

 Contingent Unliquidated Disputed**Type of NONPRIORITY unsecured claim:**

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts

Collection Attorney North Shore Cardiology Consult

4.8

Credit First/Firestone

Nonpriority Creditor's Name

PO Box 81083**Cleveland, OH 44181**

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

 No Yes

Last 4 digits of account number

8817\$1,800.00

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

 Contingent Unliquidated Disputed**Type of NONPRIORITY unsecured claim:**

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify Charge Card

4.9

GE Capital Retail Banc

Nonpriority Creditor's Name

6510 Millrock Drive**Salt Lake City, UT 84121**

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

 No Yes

Last 4 digits of account number

8186\$1,061.94

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

 Contingent Unliquidated Disputed**Type of NONPRIORITY unsecured claim:**

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify Judgment

Debtor 1 Lawrence R. Garcia

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Case number (if known)

4.1
0**HSBC Bank**

Nonpriority Creditor's Name

PO Box 2013**Buffalo, NY 14240**

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

\$0.00

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts

 Other. Specify **Notice**4.1
1**IC Systems, Inc**

Nonpriority Creditor's Name

444 Highway 96 East**St Paul, MN 55127**

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

9957**\$477.00**

When was the debt incurred?

Opened 07/16

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts

 Other. Specify **Collection Attorney Directv**4.1
2**L.L. Bean**

Nonpriority Creditor's Name

PO Box 1205**Albany, NY 12201-1205**

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

\$0.00

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts

 Other. Specify **Notice**

Debtor 1 Lawrence R. Garcia

Document

Page 24 of 58

Case number (if known)

4.1
3**Meyer & Njus, P.A.**

Nonpriority Creditor's Name

**33 N. Dearborn Ave.
Suite 1301
Chicago, IL 60602**

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only Contingent
 Debtor 2 only Unliquidated
 Debtor 1 and Debtor 2 only Disputed
 At least one of the debtors and another
 Check if this claim is for a community debt
Is the claim subject to offset?

No Other. Specify notice
 Yes

Last 4 digits of account number

8186**\$0.00**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts
 Other. Specify notice

4.1
4**Midland Funding**

Nonpriority Creditor's Name

**2365 Northside Dr
Suite 300
San Diego, CA 92108**

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only Contingent
 Debtor 2 only Unliquidated
 Debtor 1 and Debtor 2 only Disputed
 At least one of the debtors and another
 Check if this claim is for a community debt
Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

4529**\$985.00**

When was the debt incurred?

Opened 06/15

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts

**Factoring Company Account Barclays Bank
Delaware**4.1
5**North Short Cardiology Consultants**

Nonpriority Creditor's Name

**7447 W. Talcott Ave.
Chicago, IL 60631**

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only Contingent
 Debtor 2 only Unliquidated
 Debtor 1 and Debtor 2 only Disputed
 At least one of the debtors and another
 Check if this claim is for a community debt
Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

\$0.00

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts

Notice

Debtor 1 Lawrence R. Garcia

Document

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Case number (if known)

4.1
6**Old Navy**

Nonpriority Creditor's Name

**5 Thomas St.
New York, NY 10013**

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

0379**\$0.00**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts

 Other. Specify **Notice**4.1
7**Portfolio Recovery**

Nonpriority Creditor's Name

**Po Box 41067
Norfolk, VA 23541**

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

0173**\$1,219.00**

When was the debt incurred?

Opened 11/12

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts

 Other. Specify **Factoring Company Account Hsbc Bank Nevada N.A.**4.1
8**Portfolio Recovery**

Nonpriority Creditor's Name

**Po Box 41067
Norfolk, VA 23541**

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

9849**\$765.00**

When was the debt incurred?

Opened 06/13

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts

 Other. Specify **Factoring Company Account Ge Capital Retail Bank**

Debtor 1 Lawrence R. Garcia

Document

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Case number (if known)

4.1
9**Portfolio Recovery**

Nonpriority Creditor's Name

**Po Box 41067
Norfolk, VA 23541**

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

4081**\$721.00**

When was the debt incurred?

Opened 02/13

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts

Factoring Company Account Hsbc Bank Nevada N.A.4.2
0**Presence Health**

Nonpriority Creditor's Name

**Presence Resurrection Medical Cente
1643 Lewis Ave., Suite 203
Billings, MT 59102-4151**

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

5279**\$443.28**

When was the debt incurred?

01/16/2016

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify Medical Bill4.2
1**Presence Resurrection Medical Cente**

Nonpriority Creditor's Name

**Patient Financial Services
1643 Lewis Ave., Suite 203
Billings, MT 59102-4151**

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

7424**\$79.07**

When was the debt incurred?

03/22/2016

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify Medical Bills

Debtor 1 Lawrence R. Garcia

Document

Page 27 of 58

Case number (if known)

4.2
2**Synchrony Bank/Old Navy**

Nonpriority Creditor's Name

**Po Box 965064
Orlando, FL 32896**

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

0379**\$350.00**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts

 Other. Specify **Charge Card**4.2
3**Synchrony Bank/Amazon**

Nonpriority Creditor's Name

**Po Box 965064
Orlando, FL 32896**

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

9205**\$1,509.00**When was the debt incurred?
Opened 07/10 Last Active 10/04/11

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts

 Other. Specify **Charge Account**4.2
4**Synchrony Bank/Care Credit**

Nonpriority Creditor's Name

**Po Box 965064
New York, NY 10013**

Number Street City State Zip Code

Who incurred the debt? Check one.

Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim is for a community debt

Is the claim subject to offset?

No
 Yes

Last 4 digits of account number

1799**\$2,100.00**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

Contingent
 Unliquidated
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
 Debts to pension or profit-sharing plans, and other similar debts

 Other. Specify **Charge Card**

Debtor 1 Lawrence R. Garcia4.2
5

| | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------|------------|
| Synchrony Bank/PayPal Cr Nonpriority Creditor's Name | Last 4 digits of account number 9400 | \$1,163.00 |
| Po Box 965064 Orlando, FL 32896 Number Street City State Zip Code | When was the debt incurred? Opened 09/09 Last Active 10/03/11 | |
| Who incurred the debt? Check one. | | |
| <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt | <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | |
| Type of NONPRIORITY unsecured claim: | | |
| <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Credit Card | | |
| Synchrony Bank/Walmart Nonpriority Creditor's Name | Last 4 digits of account number 9849 | \$1,200.00 |
| Po Box 965064 Orlando, FL 32896 Number Street City State Zip Code | When was the debt incurred? | |
| As of the date you file, the claim is: Check all that apply | | |
| <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt | <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | |
| Type of NONPRIORITY unsecured claim: | | |
| <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Charge Card | | |
| Target Nonpriority Creditor's Name | Last 4 digits of account number 0200 | \$295.00 |
| C/O Financial & Retail Svrs Mailstop BT POB 9475 Minneapolis, MN 55440 Number Street City State Zip Code | When was the debt incurred? Opened 12/08 Last Active 1/24/12 | |
| As of the date you file, the claim is: Check all that apply | | |
| <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt | <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | |
| Type of NONPRIORITY unsecured claim: | | |
| <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Credit Card | | |

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Debtor 1 Lawrence R. Garcia

Name and Address

IRS
P.O. Box 802503
Cincinnati, OH 45280-2503

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 2.4 of (Check one):

Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

P71A

Name and Address

IRS
P.O. Box 802503
Cincinnati, OH 45280-2503

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 2.5 of (Check one):

Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

P71A**Part 4: Add the Amounts for Each Type of Unsecured Claim**

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| Total claims from Part 1 | Total Claim |
|-------------------------------------------------------------------------------------------------------------|-------------------------|
| | 0.00 |
| 6a. Domestic support obligations | 6a. \$ 0.00 |
| 6b. Taxes and certain other debts you owe the government | 6b. \$ 5,633.45 |
| 6c. Claims for death or personal injury while you were intoxicated | 6c. \$ 0.00 |
| 6d. Other. Add all other priority unsecured claims. Write that amount here. | 6d. \$ 0.00 |
| 6e. Total Priority. Add lines 6a through 6d. | 5,633.45 |
| Total claims from Part 2 | Total Claim |
| | 0.00 |
| 6f. Student loans | 6f. \$ 0.00 |
| 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. \$ 0.00 |
| 6h. Debts to pension or profit-sharing plans, and other similar debts | 6h. \$ 0.00 |
| 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. \$ 25,692.29 |
| 6j. Total Nonpriority. Add lines 6f through 6i. | 25,692.29 |

Fill in this information to identify your case:

| | | | |
|-----------------------------------------|-------------------------------|-------------|-----------|
| Debtor 1 | Lawrence R. Garcia | | |
| | First Name | Middle Name | Last Name |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name |
| United States Bankruptcy Court for the: | NORTHERN DISTRICT OF ILLINOIS | | |
| Case number (if known) | | | |

Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B:Property* (Official Form 106 A/B).

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code | State what the contract or lease is for |
|--------------------------------------------------------------------------------------------------------------|-----------------------------------------|
| 2.1 Connie Putney 6519W. Clarence Ave. Chicago, IL 60631 | residential lease |

Fill in this information to identify your case:

| | | | |
|-----------------------------------------|-------------------------------|-------------|-----------|
| Debtor 1 | Lawrence R. Garcia | | |
| | First Name | Middle Name | Last Name |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name |
| United States Bankruptcy Court for the: | NORTHERN DISTRICT OF ILLINOIS | | |
| Case number (if known) | | | |

Check if this is an amended filing

Official Form 106H Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)

No
 Yes

2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

No. Go to line 3.
 Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor
Name, Number, Street, City, State and ZIP Code

Column 2: The creditor to whom you owe the debt
Check all schedules that apply:

3.1

Name _____
Number _____ Street _____ State _____ ZIP Code _____

Schedule D, line _____
 Schedule E/F, line _____
 Schedule G, line _____

3.2

Name _____
Number _____ Street _____ State _____ ZIP Code _____

Schedule D, line _____
 Schedule E/F, line _____
 Schedule G, line _____

Fill in this information to identify your case:

| | |
|-----------------------------------------|--------------------------------------|
| Debtor 1 | Lawrence R. Garcia |
| Debtor 2 (Spouse, if filing) | |
| United States Bankruptcy Court for the: | NORTHERN DISTRICT OF ILLINOIS |
| Case number (if known) | |

Check if this is:

An amended filing
 A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Employment status

| Debtor 1 | Debtor 2 or non-filing spouse |
|----------|-------------------------------|
|----------|-------------------------------|

| | |
|-----------------------------------|-----------------------------------|
| <input type="checkbox"/> Employed | <input type="checkbox"/> Employed |
|-----------------------------------|-----------------------------------|

| | |
|--------------------------------------------------|---------------------------------------|
| <input checked="" type="checkbox"/> Not employed | <input type="checkbox"/> Not employed |
|--------------------------------------------------|---------------------------------------|

Include part-time, seasonal, or self-employed work.

Occupation

| | |
|-------|-------|
| _____ | _____ |
|-------|-------|

Occupation may include student or homemaker, if it applies.

Employer's name

| | |
|-------|-------|
| _____ | _____ |
|-------|-------|

Employer's address

| | |
|-------|-------|
| _____ | _____ |
|-------|-------|

How long employed there?

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

| For Debtor 1 | For Debtor 2 or non-filing spouse |
|--------------|-----------------------------------|
|--------------|-----------------------------------|

2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.
 3. Estimate and list monthly overtime pay.
 4. Calculate gross Income. Add line 2 + line 3.

| | |
|--------------------|----------------|
| 2. \$ 0.00 | \$ N/A |
| 3. +\$ 0.00 | +\$ N/A |
| 4. \$ 0.00 | \$ N/A |

Debtor 1 Lawrence R. Garcia

Case number (if known) _____

| Copy line 4 here | For Debtor 1 | For Debtor 2 or non-filing spouse |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|-----------------------------------|
| 5. List all payroll deductions: | 4. \$ 0.00 | \$ N/A |
| 5a. Tax, Medicare, and Social Security deductions | 5a. \$ 0.00 | \$ N/A |
| 5b. Mandatory contributions for retirement plans | 5b. \$ 0.00 | \$ N/A |
| 5c. Voluntary contributions for retirement plans | 5c. \$ 0.00 | \$ N/A |
| 5d. Required repayments of retirement fund loans | 5d. \$ 0.00 | \$ N/A |
| 5e. Insurance | 5e. \$ 0.00 | \$ N/A |
| 5f. Domestic support obligations | 5f. \$ 0.00 | \$ N/A |
| 5g. Union dues | 5g. \$ 0.00 | \$ N/A |
| 5h. Other deductions. Specify: _____ | 5h.+ \$ 0.00 + \$ _____ | \$ N/A |
| 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. \$ 0.00 | \$ N/A |
| 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. | 7. \$ 0.00 | \$ N/A |
| 8. List all other income regularly received: | | |
| 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a. \$ 0.00 | \$ N/A |
| 8b. Interest and dividends | 8b. \$ 0.00 | \$ N/A |
| 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8c. \$ 0.00 | \$ N/A |
| 8d. Unemployment compensation | 8d. \$ 0.00 | \$ N/A |
| 8e. Social Security | 8e. \$ 1,941.00 | \$ N/A |
| 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: _____ | 8f. \$ 0.00 | \$ N/A |
| 8g. Pension or retirement income | 8g. \$ 772.93 | \$ N/A |
| 8h. Other monthly income. Specify: _____ | 8h.+ \$ 0.00 + \$ _____ | \$ N/A |
| 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. \$ 2,713.93 | \$ N/A |
| 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 10. \$ 2,713.93 + \$ N/A = \$ 2,713.93 | |
| 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: _____ | 11. +\$ 0.00 | |
| 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies | 12. \$ 2,713.93 | |
| 13. Do you expect an increase or decrease within the year after you file this form? | Combined monthly income | |
| <input checked="" type="checkbox"/> No. | | |
| <input type="checkbox"/> Yes. Explain: _____ | | |

Fill in this information to identify your case:

| | |
|-----------------------------------------|--------------------------------------|
| Debtor 1 | Lawrence R. Garcia |
| Debtor 2 (Spouse, if filing) | |
| United States Bankruptcy Court for the: | NORTHERN DISTRICT OF ILLINOIS |
| Case number (If known) | |

Check if this is:

An amended filing
 A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

No. Go to line 2.
 Yes. Does Debtor 2 live in a separate household?
 No
 Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.

2. Do you have dependents? No

Do not list Debtor 1 and Yes. Fill out this information for each dependent.....

Do not state the dependents names.

| Dependent's relationship to Debtor 1 or Debtor 2 | Dependent's age | Does dependent live with you? |
|--------------------------------------------------|-----------------|-------------------------------|
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

3. Do your expenses include expenses of people other than yourself and your dependents? No Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.)

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

| Your expenses | |
|---------------|---------------|
| 4. \$ | 950.00 |

If not included in line 4:

4a. Real estate taxes
 4b. Property, homeowner's, or renter's insurance
 4c. Home maintenance, repair, and upkeep expenses
 4d. Homeowner's association or condominium dues
 5. Additional mortgage payments for your residence, such as home equity loans

| | |
|--------|--------------|
| 4a. \$ | 0.00 |
| 4b. \$ | 0.00 |
| 4c. \$ | 75.00 |
| 4d. \$ | 0.00 |
| 5. \$ | 0.00 |

| | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|
| Debtor 1 <u>Lawrence R. Garcia</u> | Case number (if known) |
| <hr/> | |
| 6. Utilities: | |
| 6a. Electricity, heat, natural gas | 6a. \$ <u>150.00</u> |
| 6b. Water, sewer, garbage collection | 6b. \$ <u>0.00</u> |
| 6c. Telephone, cell phone, Internet, satellite, and cable services | 6c. \$ <u>180.00</u> |
| 6d. Other. Specify: _____ | 6d. \$ <u>0.00</u> |
| 7. Food and housekeeping supplies | 7. \$ <u>350.00</u> |
| 8. Childcare and children's education costs | 8. \$ <u>0.00</u> |
| 9. Clothing, laundry, and dry cleaning | 9. \$ <u>100.00</u> |
| 10. Personal care products and services | 10. \$ <u>35.00</u> |
| 11. Medical and dental expenses | 11. \$ <u>100.00</u> |
| 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. | 12. \$ <u>300.00</u> |
| 13. Entertainment, clubs, recreation, newspapers, magazines, and books | 13. \$ <u>75.00</u> |
| 14. Charitable contributions and religious donations | 14. \$ <u>40.00</u> |
| 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. | |
| 15a. Life insurance | 15a. \$ <u>130.00</u> |
| 15b. Health insurance | 15b. \$ <u>275.00</u> |
| 15c. Vehicle insurance | 15c. \$ <u>0.00</u> |
| 15d. Other insurance. Specify: _____ | 15d. \$ <u>0.00</u> |
| 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____ | 16. \$ <u>0.00</u> |
| 17. Installment or lease payments: | |
| 17a. Car payments for Vehicle 1 | 17a. \$ <u>0.00</u> |
| 17b. Car payments for Vehicle 2 | 17b. \$ <u>0.00</u> |
| 17c. Other. Specify: _____ | 17c. \$ <u>0.00</u> |
| 17d. Other. Specify: _____ | 17d. \$ <u>0.00</u> |
| 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). | 18. \$ <u>0.00</u> |
| 19. Other payments you make to support others who do not live with you. Specify: _____ | \$ <u>0.00</u> |
| 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. | |
| 20a. Mortgages on other property | 20a. \$ <u>0.00</u> |
| 20b. Real estate taxes | 20b. \$ <u>0.00</u> |
| 20c. Property, homeowner's, or renter's insurance | 20c. \$ <u>0.00</u> |
| 20d. Maintenance, repair, and upkeep expenses | 20d. \$ <u>0.00</u> |
| 20e. Homeowner's association or condominium dues | 20e. \$ <u>0.00</u> |
| 21. Other: Specify: _____ | 21. +\$ <u>0.00</u> |
| 22. Calculate your monthly expenses | |
| 22a. Add lines 4 through 21. | \$ <u>2,760.00</u> |
| 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 | \$ <u>2,760.00</u> |
| 22c. Add line 22a and 22b. The result is your monthly expenses. | \$ <u>2,760.00</u> |
| 23. Calculate your monthly net income. | |
| 23a. Copy line 12 (<i>your combined monthly income</i>) from Schedule I. | 23a. \$ <u>2,713.93</u> |
| 23b. Copy your monthly expenses from line 22c above. | 23b. -\$ <u>2,760.00</u> |
| 23c. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> . | \$ <u>-46.07</u> |
| 24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? | |
| <input checked="" type="checkbox"/> No. | |
| <input type="checkbox"/> Yes. | Explain here: _____ |

Fill in this information to identify your case:

| | | | |
|-----------------------------------------|-------------------------------|-------------|-----------|
| Debtor 1 | Lawrence R. Garcia | | |
| | First Name | Middle Name | Last Name |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name |
| United States Bankruptcy Court for the: | NORTHERN DISTRICT OF ILLINOIS | | |
| Case number (if known) | | | |

Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

[REDACTED] Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

No

Yes. Name of person _____

Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119)

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X /s/ Lawrence R. Garcia

Lawrence R. Garcia
Signature of Debtor 1

Date December 6, 2016

X

Signature of Debtor 2

Date _____

Fill in this information to identify your case:

| | | | |
|-----------------------------------------|-------------------------------|-------------|-----------|
| Debtor 1 | Lawrence R. Garcia | | |
| | First Name | Middle Name | Last Name |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name |
| United States Bankruptcy Court for the: | NORTHERN DISTRICT OF ILLINOIS | | |
| Case number (if known) | | | |

Check if this is an amended filing

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Give Details About Your Marital Status and Where You Lived Before

1. What is your current marital status?

Married
 Not married

2. During the last 3 years, have you lived anywhere other than where you live now?

No
 Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

Debtor 1 Prior Address:

Dates Debtor 1
lived there

Debtor 2 Prior Address:

Dates Debtor 2
lived there

3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.)

No
 Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

Part 2 Explain the Sources of Your Income

4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.
If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

No
 Yes. Fill in the details.

| For last calendar year: (January 1 to December 31, 2015) | Debtor 1 | | Debtor 2 | |
|--------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------|-------------------------------------------------------------------------------------------------------------|----------------------------------------------------|
| | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| | <input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business | \$4,075.00 | <input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business | |

| Debtor 1 | | Gross income (before deductions and exclusions) | Debtor 2 | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
|---------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------|-----------------|--------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------|
| For the calendar year before that: (January 1 to December 31, 2014) | <input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business | \$4,493.00 | | <input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business | |
| | | | | | |

5. Did you receive any other income during this year or the two previous calendar years?

Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

No
 Yes. Fill in the details.

| | Debtor 1 Sources of income Describe below. | Gross income from each source (before deductions and exclusions) | Debtor 2 Sources of income Describe below. | Gross income (before deductions and exclusions) |
|---------------------------------------------------------------------------------------|----------------------------------------------------------------|----------------------------------------------------------------------------|----------------------------------------------------------------|-----------------------------------------------------------|
| From January 1 of current year until the date you filed for bankruptcy: | Social Security | \$22,834.90 | | |
| | ADA Pension | \$5,410.51 | | |
| For last calendar year: (January 1 to December 31, 2015) | Social Security | \$24,910.00 | | |
| For the calendar year before that: (January 1 to December 31, 2014) | Social Security | \$24,491.00 | | |

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy**6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?**

No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more?

No. Go to line 7.
 Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

Yes. **Debtor 1 or Debtor 2 or both have primarily consumer debts.**

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

No. Go to line 7.
 Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

| Creditor's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Was this payment for ... |
|------------------------------------|-------------------------|--------------------------|-----------------------------|---------------------------------|
| | | | | |

7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?

Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

 No Yes. List all payments to an insider.

| Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment |
|----------------------------|------------------|-------------------|----------------------|-------------------------|
|----------------------------|------------------|-------------------|----------------------|-------------------------|

8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?

Include payments on debts guaranteed or cosigned by an insider.

 No Yes. List all payments to an insider.

| Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment |
|----------------------------|------------------|-------------------|----------------------|-------------------------|
|----------------------------|------------------|-------------------|----------------------|-------------------------|

Part 4: Identify Legal Actions, Repossessions, and Foreclosures**9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?**

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

 No Yes. Fill in the details.

| Case title Case number | Nature of the case | Court or agency | Status of the case |
|------------------------------------------------------------|--------------------|--------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|
| GE Capital Retail Bank v Lawrence Garcia 2012 M1 148186 | civil | Cook County Circuit Court 50 W. Washington Chicago, IL 60602 | <input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded |

10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?
Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below.

| Creditor Name and Address | Describe the Property | Date | Value of the property |
|---------------------------|-----------------------|------|-----------------------|
| | Explain what happened | | |

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details.

| Creditor Name and Address | Describe the action the creditor took | Date action was taken | Amount |
|---------------------------|---------------------------------------|-----------------------|--------|
| | | | |

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes

Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

No
 Yes. Fill in the details for each gift.

| Gifts with a total value of more than \$600 per person | Describe the gifts | Dates you gave the gifts | Value |
|--------------------------------------------------------|--------------------|--------------------------|-------|
| Person to Whom You Gave the Gift and Address: | | | |

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

No
 Yes. Fill in the details for each gift or contribution.

| Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) | Describe what you contributed | Dates you contributed | Value |
|----------------------------------------------------------------------------------------------------------------------------------------|-------------------------------|-----------------------|-------|
| | | | |

Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

No
 Yes. Fill in the details.

| Describe the property you lost and how the loss occurred | Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. | Date of your loss | Value of property lost |
|----------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|------------------------|
| | | | |

Part 7: List Certain Payments or Transfers

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

No
 Yes. Fill in the details.

| Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You | Description and value of any property transferred | Date payment or transfer was made | Amount of payment |
|-------------------------------------------------------------------------------------------------------|---------------------------------------------------|-----------------------------------|-------------------|
| CIN Legal Data Services 4540 Honeywell Ct. Dayton, OH 45424 | credit report and credit counseling | 11/2016 | \$72.00 |

| | | | |
|-----------------------------------------------------------------------------------------------------------------------------------|---------------|---------|----------|
| The Law Office of George Kasios, Ltd. 4433 W. Touhy Avenue Suite 208 Lincolnwood, IL 60712 georgekasios@kasioslaw.com | Attorney Fees | 11/2016 | \$591.00 |
|-----------------------------------------------------------------------------------------------------------------------------------|---------------|---------|----------|

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?
Do not include any payment or transfer that you listed on line 16.

No
 Yes. Fill in the details.

| Person Who Was Paid Address | Description and value of any property transferred | Date payment or transfer was made | Amount of payment |
|--------------------------------|---------------------------------------------------|-----------------------------------|-------------------|
|--------------------------------|---------------------------------------------------|-----------------------------------|-------------------|

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

No
 Yes. Fill in the details.

| Person Who Received Transfer Address | Description and value of property transferred | Describe any property or payments received or debts paid in exchange | Date transfer was made |
|-----------------------------------------|-----------------------------------------------|----------------------------------------------------------------------|------------------------|
| Person's relationship to you | | | |

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)

No
 Yes. Fill in the details.

| Name of trust | Description and value of the property transferred | Date Transfer was made |
|---------------|---------------------------------------------------|------------------------|
|---------------|---------------------------------------------------|------------------------|

Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

No
 Yes. Fill in the details.

| Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) | Last 4 digits of account number | Type of account or instrument | Date account was closed, sold, moved, or transferred | Last balance before closing or transfer |
|--------------------------------------------------------------------------------------|---------------------------------|-------------------------------|------------------------------------------------------|-----------------------------------------|
|--------------------------------------------------------------------------------------|---------------------------------|-------------------------------|------------------------------------------------------|-----------------------------------------|

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

No
 Yes. Fill in the details.

| Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had access to it? Address (Number, Street, City, State and ZIP Code) | Describe the contents | Do you still have it? |
|----------------------------------------------------------------------------------|-------------------------------------------------------------------------------|-----------------------|-----------------------|
|----------------------------------------------------------------------------------|-------------------------------------------------------------------------------|-----------------------|-----------------------|

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

No
 Yes. Fill in the details.

| Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | Who else has or had access to it? Address (Number, Street, City, State and ZIP Code) | Describe the contents | Do you still have it? |
|-----------------------------------------------------------------------------|--------------------------------------------------------------------------------------|-----------------------|-----------------------|
|-----------------------------------------------------------------------------|--------------------------------------------------------------------------------------|-----------------------|-----------------------|

Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

No

Yes. Fill in the details.

Owner's Name

Address (Number, Street, City, State and ZIP Code)

Where is the property?

(Number, Street, City, State and ZIP Code)

Describe the property

Value

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- Environmental law* means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site* means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material* means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

No

Yes. Fill in the details.

Name of site

Address (Number, Street, City, State and ZIP Code)

Governmental unit

Address (Number, Street, City, State and ZIP Code)

Environmental law, if you know it

Date of notice

25. Have you notified any governmental unit of any release of hazardous material?

No

Yes. Fill in the details.

Name of site

Address (Number, Street, City, State and ZIP Code)

Governmental unit

Address (Number, Street, City, State and ZIP Code)

Environmental law, if you know it

Date of notice

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

No

Yes. Fill in the details.

Case Title

Case Number

Court or agency

Name

Address (Number, Street, City, State and ZIP Code)

Nature of the case

Status of the case

Part 11: Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

- A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
- A member of a limited liability company (LLC) or limited liability partnership (LLP)
- A partner in a partnership
- An officer, director, or managing executive of a corporation
- An owner of at least 5% of the voting or equity securities of a corporation

No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business.

| | | |
|------------------------------------------------------------------------|-------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------|
| Business Name Address (Number, Street, City, State and ZIP Code) | Describe the nature of the business Name of accountant or bookkeeper | Employer Identification number Do not include Social Security number or ITIN. Dates business existed |
|------------------------------------------------------------------------|-------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------|

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

 No Yes. Fill in the details below.

| | |
|---------------------------------------------------------------|-------------|
| Name Address (Number, Street, City, State and ZIP Code) | Date Issued |
|---------------------------------------------------------------|-------------|

Part 12: Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.
18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Lawrence R. Garcia

Lawrence R. Garcia
Signature of Debtor 1

Signature of Debtor 2

Date December 6, 2016

Date _____

Did you attach additional pages to *Your Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?

 No Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

 No Yes. Name of Person _____. Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Fill in this information to identify your case:

| | | | |
|-----------------------------------------|-------------------------------|-------------|-----------|
| Debtor 1 | Lawrence R. Garcia | | |
| | First Name | Middle Name | Last Name |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name |
| United States Bankruptcy Court for the: | NORTHERN DISTRICT OF ILLINOIS | | |
| Case number (if known) | | | |

Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

| Identify the creditor and the property that is collateral | What do you intend to do with the property that secures a debt? | Did you claim the property as exempt on Schedule C? |
|----------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------|
| Creditor's name: Description of property securing debt: | <input type="checkbox"/> Surrender the property. <input type="checkbox"/> Retain the property and redeem it. <input type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> . <input type="checkbox"/> Retain the property and [explain]: | <input type="checkbox"/> No <input type="checkbox"/> Yes |
| Creditor's name: Description of property securing debt: | <input type="checkbox"/> Surrender the property. <input type="checkbox"/> Retain the property and redeem it. <input type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> . <input type="checkbox"/> Retain the property and [explain]: | <input type="checkbox"/> No <input type="checkbox"/> Yes |
| Creditor's name: Description of property securing debt: | <input type="checkbox"/> Surrender the property. <input type="checkbox"/> Retain the property and redeem it. <input type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> . <input type="checkbox"/> Retain the property and [explain]: | <input type="checkbox"/> No <input type="checkbox"/> Yes |
| Creditor's name: | <input type="checkbox"/> Surrender the property. | <input type="checkbox"/> No |

Debtor 1 Lawrence R. Garcia Case number (if known) _____

name: Retain the property and redeem it. Yes
Description of Retain the property and enter into a
property *Reaffirmation Agreement.*
securing debt: Retain the property and [explain]: _____

Part 2: List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

| Describe your unexpired personal property leases | Will the lease be assumed? |
|--------------------------------------------------|------------------------------|
| Lessor's name: | <input type="checkbox"/> No |
| Description of leased | <input type="checkbox"/> Yes |
| Property: | |
| Lessor's name: | <input type="checkbox"/> No |
| Description of leased | <input type="checkbox"/> Yes |
| Property: | |
| Lessor's name: | <input type="checkbox"/> No |
| Description of leased | <input type="checkbox"/> Yes |
| Property: | |
| Lessor's name: | <input type="checkbox"/> No |
| Description of leased | <input type="checkbox"/> Yes |
| Property: | |
| Lessor's name: | <input type="checkbox"/> No |
| Description of leased | <input type="checkbox"/> Yes |
| Property: | |
| Lessor's name: | <input type="checkbox"/> No |
| Description of leased | <input type="checkbox"/> Yes |
| Property: | |
| Lessor's name: | <input type="checkbox"/> No |
| Description of leased | <input type="checkbox"/> Yes |
| Property: | |
| Lessor's name: | <input type="checkbox"/> No |
| Description of leased | <input type="checkbox"/> Yes |
| Property: | |
| Lessor's name: | <input type="checkbox"/> No |
| Description of leased | <input type="checkbox"/> Yes |
| Property: | |

Part 3: Sign Below

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.

X /s/ Lawrence R. Garcia
Lawrence R. Garcia
Signature of Debtor 1

X _____
Signature of Debtor 2

Date December 6, 2016

Date _____

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,
and

Your debts are primarily consumer debts.
Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

| | |
|----------------|--------------------|
| \$245 | filing fee |
| \$75 | administrative fee |
| + <u> \$15</u> | trustee surcharge |
| | \$335 total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

| | |
|-------------------|--------------------|
| \$1,167 | filing fee |
| + \$550 | administrative fee |
| \$1,717 total fee | |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | |
|-------|-----------------------------------|
| \$200 | filing fee |
| + | <u>\$75 administrative fee</u> |
| | \$275 total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | |
|-------|-----------------------------------|
| \$235 | filing fee |
| + | <u>\$75 administrative fee</u> |
| | \$310 total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_form_s.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to:

<http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCreditAndDebtCounselors.aspx>

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy Court
Northern District of Illinois

In re Lawrence R. Garcia

Debtor(s)

Case No.

Chapter

7

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

| | |
|-------------------------------------------------------------|------------------|
| For legal services, I have agreed to accept | \$ 591.00 |
| Prior to the filing of this statement I have received | \$ 591.00 |
| Balance Due | \$ 0.00 |

2. The source of the compensation paid to me was:

Debtor Other (specify):

3. The source of compensation to be paid to me is:

Debtor Other (specify):

4. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.
 I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:
a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
d. [Other provisions as needed]
Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods.

6. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

December 6, 2016

Date

/s/ George Kasios

George Kasios

Signature of Attorney

The Law Office of George Kasios, Ltd.

4433 W. Touhy Avenue

Suite 208

Lincolnwood, IL 60712

847-983-4900 Fax: 847-423-2664

georgekasios@kasioslaw.com

Name of law firm

The Law Office of George Kasios, Ltd.

4433 W. Touhy Ave., Suite 208

Lincolnwood, IL 60712

Phone: 847-983-4900 Fax: 847-423-2664

CONSULTATION AGREEMENT

THIS AGREEMENT IS REQUIRED BY FEDERAL LAW (11 U.S.C. § 528(a))

1. Parties: In this contract, "Client" means the undersigned, both individually and jointly; "Attorney" means the law firm of The Law Office of George Kasios, Ltd. And its staff.
2. Purpose: Client has requested the opportunity to consult with and obtain information and advice from Attorney concerning options for relief from debts, which may include filing bankruptcy. This agreement is for purposes of that consultation only.
3. Client's Duties: In order for Attorney to give meaningful advice; Client agrees to give accurate, honest, full and fair disclosure of financial information concerning income over the past three years from all sources, monthly living expenses, the type and amount of all debts (including names and addresses of all creditors), all assets and property owned by the client, wherever located and by whomever held, and any additional information determined by Attorney to be relevant.
4. Services: The attorney agrees to provide Client with the following services:
 - a. Analyzing Client's financial circumstances based on information provided by Client;
 - b. To the extent possible, advising Client of bankruptcy options and non-bankruptcy options based on the information provided by Client;
 - c. If Client has not provided Attorney with sufficient information upon which to fully advise Client on Client's options, informing Client what additional information Client needs to provide in order to enable Attorney to provide such advice and information;
 - d. Where applicable, advising Client of the requirements placed upon Client to file a bankruptcy; and
 - e. To the extent possible, quoting a fee for providing bankruptcy and/or nonbankruptcy assistance to Client.

5. Fees (check one):

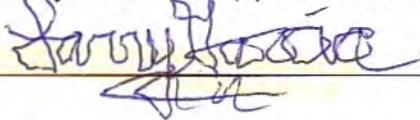
A consultation fee will be waived if Client decides not to retain Attorney, in which case the attorney-client relationship shall terminate at the conclusion of the interview.

Client agrees to pay \$ _____ in nonrefundable consultation fee

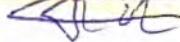
In the event Client decides to retain Attorney, this consultation becomes billable and is covered by the legal fee charged for the case, and a new written contract, as well as a Court-Approved Retention Agreement if applicable, must be signed by client and Attorney, which shall supersede this agreement. The new agreement(s) will also provide a detailed explanation of the parties' obligation and a breakdown of the costs.

6. Acknowledgement: Client acknowledges that the first date upon which Attorney provided any bankruptcy assistance to Client is the date noted below, and that Attorney provided Client with a copy of this agreement and the disclosure and information mandated by Section 527(b) of the Bankruptcy Code.

Print: Larry Garcia

Signature: 

Print: Joe

Signature: 

Attorney: Joe

Date: 11/5/16

You are notified:

1. All information that you are required to provide with a petition and thereafter during a case under the Bankruptcy Code is required to be complete, accurate, and truthful.

2. All assets and all liabilities are required to be completely and accurately disclosed in the documents filed to commence the case. Some places in the Bankruptcy Code require that you list the replacement value of each asset. This must be the replacement value of the property at the date of filing the petition, without deducting for costs of sale or marketing, established after a reasonable inquiry. For property acquired for personal, family, or household use, replacement value means the price a retail merchant would charge for property of that kind, considering the age and condition of the property.

3. The following information, which appear on Official Form 22, Statement of Current Monthly Income, are required to be stated after reasonable inquiry: current monthly income, the amounts specified in section 707(b)(2), and in a case under chapter 13 of the Bankruptcy Code, disposable income (determined in accordance with section 707(b)(s)).

4. Information that you provide during your case may be audited pursuant to provisions of the Bankruptcy Code. Failure to provide such information may result in dismissal of the case under this title or other sanction, including criminal sanctions.

IMPORTANT INFORMATION ABOUT BANKRUPTCY ASSISTANCE SERVICES FROM AN ATTORNEY OR BANKRUPTCY PETITION PREPARER

If you decide to seek bankruptcy relief, you can represent yourself, you can hire an attorney to represent you, or you can get help in some localities from a bankruptcy petition preparer who is not an attorney. THE LAW REQUIRES AN ATTORNEY OR BANKRUPTCY PETITION PREPARER TO GIVE YOU A WRITTEN CONTRACT SPECIFYING WHAT THE ATTORNEY OR BANKRUPTCY PETITION PREPARER WILL DO FOR YOU AND HOW MUCH IT WILL COST. Ask to see the contract before you hire anyone.

The following information helps you understand what must be done in a routine bankruptcy case to help you evaluate how much service you need. Although bankruptcy can be complex, many cases are routine.

Before filing a bankruptcy case, either you or your attorney should analyze your eligibility for different forms of debt relief available under the Bankruptcy Code and which forms of relief is most likely to be beneficial for you. Be sure you understand the relief you can obtain and its limitations. To file a bankruptcy case, documents called a Petition, Schedules and Statement of Financial Affairs, as well as in some cases a Statement of Intention need to be prepared correctly and filed with the bankruptcy court. Once your case starts, you will have to attend the required first meeting of the creditors where you may be questioned by a court official called a "trustee" and by creditors.

If you choose to file a chapter 7 case, you may be asked by a creditor to reaffirm a debt. You may want help deciding whether to do so. A creditor is not permitted to coerce you into reaffirming your debts.

If you choose to file a chapter 13 case in which you repay your creditors what you can afford over 3 to 5 years, you may also want help with preparing your chapter 13 plan and with the confirmation hearing on your plan which will be before a bankruptcy judge.

If you select another type of relief under the Bankruptcy Code other than chapter 7 or chapter 13, you will want to find out what should be done from someone familiar with that type of relief.

Your bankruptcy case may also involve litigation. You are generally permitted to represent yourself in litigation in bankruptcy court, but only attorneys, not petition preparers, can give you legal advice.

Print: Larry Garcia Signature: Larry Garcia Date: 12/5/16

Print: _____ Signature: _____ Date: _____

Attorney-Client Legal Services Agreement

In consideration for services to be rendered to undersigned Client Lawrence R. Garcia, who resides at 6154 W. Thorndale Ave., in the city of Chicago, Illinois, zip code 60646 by The Law Office of George Kasios, Ltd., located at 4433 W. Touhy, Suite 208, Lincolnwood, IL 60712, in connection with representing Client regarding bankruptcy matters, Client, agrees to pay Attorney as follows:

1. Attorney fees for the bankruptcy case Client has retained Attorney for, are \$591.00, not including the court filing fee which is \$335.00 and the related expenses, including but not limited to credit counseling and credit report, of \$72.00. The total amount that will be due for attorney fees and costs is \$998.00. Client is to pay at least \$200.00 for Attorney to begin working on the petition, and all remaining amounts must be paid for the case to be filed. No case will be filed unless all attorney fees and costs are paid in full. If, within 6 (six) months, attorney fees and costs are not paid, the case will be closed and an accounting provided to the Client, unless Client and Attorney agree otherwise.
2. Client understands that any funds that client is tendering to The Law Office of George Kasios, Ltd. as part of this advance payment retainer shall immediately become the property of The Law Office of George Kasios, Ltd. in exchange for commitment to provide legal services related to this bankruptcy case, which include drafting the petition, filing the bankruptcy case, attending the creditor's meeting, and counseling the client. Said funds will be deposited into the main operating bank account of The Law Office of George Kasios, Ltd. and will be used for general expenses. Client also understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain the client's property as security for future services. However, The Law Office of George Kasios, Ltd. does not represent client under such a security retainer because the preparation of a bankruptcy case requires many disparate tasks and functions for the attorney, some of which require legal expertise while others may be only ministerial. Attorney is unable to represent Client without receiving an advanced payment retainer since a security retainer will be within the reach of the Client's creditors. Client further understands that the benefits that the client is receiving under this fee arrangement is the commitment of the attorney to perform any and all work reasonably necessary to represent client's interests absent any extraordinary circumstances.
3. This retainer covers the initial consultation, drafting the petition, schedules, and related documents pertaining to the initial bankruptcy filing, attending the Trustee meeting, drafting any reaffirmation agreements, consulting client, and seeing case through discharge. This retainer agreement does not include converting a Chapter 7 case to a Chapter 13, does not include prosecuting a US Trustee motion to dismiss for abuse, does not include Section 722 redemption, does not include motions to avoid liens and judicial lien avoidance, does not include appeals, does not include adversary proceedings, and does not include post-discharge litigations. Attorney may, but is not obligated to, represent client in any of the above mentioned excluded services. Representation for the above mentioned excluded services will require an additional retainer agreement and will have additional fees.
4. Attorney reserves the right to withdraw from Client representation if, among other things, Client fails to honor the terms of this Agreement, including non-payment of Attorney and court filing fees; Client fails to cooperate or follow advice on a material matter, or if any fact or circumstance arises or is discovered that would render continuing representation unlawful or unethical. Client is aware of an ethical requirement imposed upon all Attorneys in this state. If a Client, in the course of representation by an Attorney, perpetrates a fraud upon any person or tribunal, the Attorney is obligated to call upon the Client to rectify the same. If the Client refuses or is unable to do so, the Attorney is required to reveal the fraud to the affected person or tribunal. Attorney may terminate representation of Client as permitted by the Illinois Rules of Professional Conduct and Local Bankruptcy Rules.
5. Client may also discharge Attorney at any time, however Client acknowledges that payment will be due for services already rendered by Attorney. The flat fee for this bankruptcy case is an advanced payment for future services and becomes the Attorney's property upon receipt, and is therefore nonrefundable upon the filing of the bankruptcy petition. If representation is terminated prior to the petition being filed, and Client has paid more than \$350.00 to Attorney, Attorney will provide Client with an itemization of all the work done by Attorney and his staff, and will explain through said itemization any amounts not to be returned to the Client. Attorney's hourly rate is \$200.00 an hour, and non-attorney rate is \$60.00 an hour for purposes of this itemization and computation of services rendered. If representation is terminated prior to the petition being filed, and Client has paid \$349.00 or less, the Client shall not get any funds returned as this fee is nonrefundable. Furthermore, any expenses Attorney has had to incur will be deducted from the fees paid, including the expenses that would have been covered by the flat fee had the termination of services not occurred.
6. It is Clients responsibility to provide complete and accurate information and documentation to attorney within a timely manner. It is Clients responsibility to inform attorney of change in circumstances including change in employment, change in income, change of address, change of phone number, and any other change which may be material to the case.
7. Client understands that Attorney may use a coverage attorney in the case, and if Attorney does so, Client will be informed of the same prior to the use of coverage attorney. Coverage attorney shall be made familiar with the Client's case for effective representation.
8. Client agrees that Attorney may discard Client records after five (5) years of the completion of the Client's bankruptcy case.
9. Client acknowledges that the US Trustee has a right to dismiss a Chapter 7 case if it believes the case is abusive. In the event the US Trustee files a motion to dismiss for substantial abuse, Client has several options: engage Attorney to defend against such a motion at a rate of \$200.00 an hour, or engage outside counsel to defend against such a motion, or convert to a Chapter 13. Client acknowledges that converting to a Chapter 13 will require a new retainer at a fee to be discussed by Attorney and Client. Client acknowledges that the fee for the Chapter 7 will not be credited toward the fee for a Chapter 13 filing. Client understands that the services discussed in this paragraph are outside the scope of the Chapter 7 Bankruptcy agreement.

10. Client is responsible for acknowledging that all creditors have been included in the bankruptcy schedules. Client understands that there is a \$30.00 court cost to add additional creditor's to the client's schedules after the case has already been submitted and therefore understands that he/she will be charged \$30.00 for such additional creditors to be added.

11. Client acknowledges the case will not be filed with the court unless all fees for a Chapter 7 are paid and Client has reviewed and signed off on their bankruptcy schedules and related documents.

12. Client hereby authorizes Attorney to obtain information about Client's assets, prior addresses, liens, judgments, prior bankruptcy filings, motor vehicle registrations, and other public and non-public information that will be used to verify and ensure the completeness of the information Client provides Attorney.

13. Client further acknowledges that Attorney advised Client that sending unencrypted email can violate the attorney-client privilege as it involves the potential risk of interception of client confidences. Client's signature in this disclaimer serves as Client's informed consent to communicate with Attorney and/or service providers via email.

14. Since the outcome of negotiations and litigation is subject to factors which cannot always be foreseen, Client acknowledges and understands that Attorney has made no promises or guarantees to Client concerning the outcome and is unable to do so. Nothing in this Bankruptcy Retainer Agreement shall be construed as such a promise or guarantee. Attorney cannot guarantee that Client will qualify for a Chapter 7.

15. Client understands that individuals who file for relief under Chapter 7 or Chapter 13 of the Bankruptcy Code are subject to audits by the U.S. Trustee. If Clients case is selected for an audit, Client understands that he/she must fully comply with audit and all requests for documents and information.

16. Client understands that filing a Chapter 7 bankruptcy does not automatically discharge or remove liens from any real estate. Client agrees that the Attorney will not take any action to avoid (remove) any lien on real estate in a Chapter 7 unless Client specifically authorizes the Attorney to do so in writing. Client agrees that the Attorney will rely on Client's statements concerning ownership of real property and any liens attached to Client's real property. Client agrees that no real estate title search will be conducted. Client agrees that Attorney will search the public records but will not conduct an official public records search for lawsuit filed against Client or judgments granted against Client. Client understands that a search of the public records might not provide Attorney with all information for Client, as Client's name might be misspelled in public records or Client's name might be very common, or information cannot be ascertained in a basic search. Client must provide Attorney information related to lawsuits filed against Client or judgment granted against Client to Attorney. If Client wishes to obtain an official real estate title search or public records search, Client must separately order and pay for a real estate title search, or public records search for lawsuits or judgment, if Clients wishes to obtain one. Client understands that Trustee may within the Trustee power intercept client's tax refund. **Client agrees to hold Attorney harmless if Client later discovers liens, lawsuits or judgments against Client or against Client's real estate.**

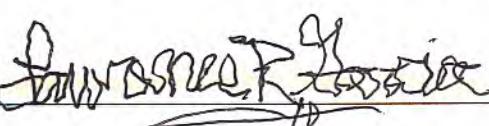
17. Client acknowledges that Client has read and understands all the terms contained in this Bankruptcy Retainer Agreement and that, whether written, spoken, recorded or transcribed by any other means no other terms are made part of this Bankruptcy Retainer Agreement. Client is in agreement with the terms of this agreement and has signed on the signature lines below.

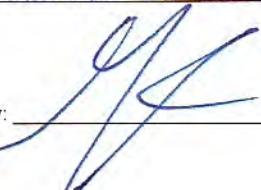
18. Client acknowledges that Attorney advised Client that conducting attorney-client conversations over cellular telephones though not necessarily violating attorney-client privilege, involves potential risks of interception and such conversations cannot be considered confidential. Client's signature in this disclaimer served as Client's informed consent to communicate with Attorney and/or service providers via cellular telephones should the need arise.

19. Client understands that Attorney does not provide taxation advice and if Client wishes taxation advice, they must seek it from a taxation professional such as a Certified Public Accountant.

Date: 11/16/16

Print: Lawrence R. Garcia

Signature: 

Attorney: 

**United States Bankruptcy Court
Northern District of Illinois**

In re Lawrence R. Garcia

Debtor(s)

Case No.

Chapter

7

VERIFICATION OF CREDITOR MATRIX

Number of Creditors: _____ **27**

The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge.

Date: December 6, 2016

/s/ Lawrence R. Garcia

Lawrence R. Garcia

Signature of Debtor

Alliant Credit Union
Attn: Collection Dept
Po Box 66945
Chicago, IL 60666

Barclays Bank
125 S. West St.
Wilmington, DE 19801

Caine & Weiner
Po Box 5010
Woodland Hills, CA 91365

Capital One
Po Box 30285
Salt Lake City, UT 84130

Cardworks/CW Nexus
Pob 9201
Old Bethpage, NY 11804

Certified Services Inc
Po Box 177
Waukegan, IL 60079

Credit First/Firestone
PO Box 81083
Cleveland, OH 44181

GE Capital Retail Banl
6510 Millrock Drive
Salt Lake City, UT 84121

HSBC Bank
PO Box 2013
Buffalo, NY 14240

IC Systems, Inc
444 Highway 96 East
St Paul, MN 55127

Illinois Dept. of Revenue
PO Box 19035
Springfield, IL 62794-9035

IRS
P.O. Box 802503
Cincinnati, OH 45280-2503

IRS Dept. of Treasury
Internal Revenue Service
Kansas City, MO 64999

L.L. Bean
PO Box 1205
Albany, NY 12201-1205

Meyer & Njus, P.A.
33 N. Dearborn Ave.
Suite 1301
Chicago, IL 60602

Midland Funding
2365 Northside Dr
Suite 300
San Diego, CA 92108

North Short Cardiology Consultants
7447 W. Talcott Ave.
Chicago, IL 60631

Old Navy
5 Thomas St.
New York, NY 10013

Portfolio Recovery
Po Box 41067
Norfolk, VA 23541

Presence Health
Presence Resurrection Medical Center
1643 Lewis Ave., Suite 203
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Presence Resurrection Medical Center
Patient Financial Services
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Synchronoy Bank/Old Navy
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Synchrony Bank/Care Credit
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Synchrony Bank/PayPal Cr
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Synchrony Bank/Walmart
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Target
C/O Financial & Retail Srvs
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